

Yonah M. Rosen
Personal Expense

09/914001

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final Original	
1	02/01/01
2	02/01/01
3	02/01/01
4	02/01/01
5	02/01/01
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50	02/01/01

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
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